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Application Number | 09/480,843 Filing Date POWER OF ATTORNEY 1/11/2000 First Named Inventor MOORE and Title CORRESPONDENCE ADDRESS Method and system for local... Art Link INDICATION FORM 3527 EHILCOT, Richard BOC9-1899-0080UST (8134-0008) COMMON NAME Alterney Docket Number I hereby revoke all previous powers of attorney given in the above-identified application, RECEIVED I hereby appoint: CENTRAL FAX CENTER Practitioners associated with the Customer Number: JAN 3 1 2005 Practitionar(s) named balow; Name Registration Number as myour attermey(s) or agent(s) to presecute the application identified above, and to transact all business in the United States Patent are Trademark Office connected therewith. Please recognize or chango (no correspondence address for the above-identified application to: The address associated with the above-mentioned Gustomer Number:  $\mathbf{O}\mathbf{R}$ The address associated with Customer Number: OR Firm or Individual Name CITY Zip Country Tolepho Fax am the: Applicant/Inventor. Assignee of record of the entire interest, See 37 CFR 3.71. Statement under 37 CFR 3.72(b) is enclosed. (Form PTO/S9/98) SCHATURE of Applica nt or Assigned of Record Lynne B. Anterson nderson Dale Telephone 703-299-1455 Title and Company Program Manager, USPTO Lieisen NOTE: Signatures of all the inventors or easignees of report of the entire (nterest or their representative(a) are required. Submit multiple forms if more than one algorithm is required, and below. Total of 1 forms are submitted.

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